IN THE	TED STA	TES PATE	NE AN	ID TRADEMAR	K_OFFICE	PATENT API	PLICATION
<b>~</b> . ⊸i	•			Group Art	1645		
Inventor(s): LAMBERT ET AL	V			Examiner:	Ford		
	01,289			Atty. Dkt.	P 275343	C155.03/O	
Series Code ↑ S	erial No. ↑			·	M#	Client Ref	
Filed: May 29, 2001  Hon. Commissioner of Patents  Washington, D.C. 20231  Sir:  REPLY/AMENGMEN  This is a reply/amendment/letter in the which is incomparated beginning by making the property of the comparated by making the property of the comparated by making the comparated by the comparated by making the comparated by the comparated by making the comparated by making the comparated by the comparated by the comparated by the comparated by th			₽ <sub>∧</sub>	Appln. Title:	IMPROVEMEN'	TS IN OR REI	LATING
Hon. Commissioner of Patents O	INE		<b>'</b> \?'	<b>)</b> .	TO DIAGNOSIS	AND TREAT	MENT OF
Washington, D.C. 20231	~ ~\		20		BACTERIAL INI	-ECTIONS	
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Sir:	بن	Co	. 0	9, 5			
REPLY/AMENDMEN	IT/LETTER	2/	1200	<i>&lt;00</i> , <b>Dat</b> e:	October 3, 2001		
- ATRI	ADEMARK		CP 16	3a			
This is a reply/amendment/letter in the	e above-identif	ied applicati	on ane	includes the here	ewith attachment o	t same date a	nd subject
which is incorporated hereinto by rele	rence and the	signature be	elow is i	treated as the sig	inature to the attac	hment in abse	ence of a
signature thereto.							
FEE REQUIREMENTS FOR CLAIMS AS AMENDED							
1. Small Entity claim  A MINOT made For B & C							
A. NOT made  B. Withdrawn  See Required	Claims remaining after	Highest nur previously pa		Present Extra	Large/Small Entity	Additional Fee	Fee Code
C. made herewith Separate Paper	amendment	previously pa	alu ioi			ree	Lg/Sm
D.  made previously (Pat-256)							
2. Total Effective Claims		**minus	0	0	x \$18/\$9 =	+ \$0	103/203
3. Independent Claims		***minus	0	0	x \$84/\$42 =	+ \$0	102/202
4. If amendment enters proper multiple	e dependent c		his app	lication for first			
time (leave blank if this is a reissue ap					+ \$280/\$140 =	+ \$0	104/204
5. Original due Date: September 9	, 2001	NONE					
6. Petition is hereby made to extend	the original du	ne (	1 mo)	\$110/\$55 =			115/215
date to cover the date this response is			mos)	\$400/\$200 =	+ \$110		116/216
		•	, ,			4.4.1	117/217
requisite fee is attached		(3	mos)	\$920/\$460 =		133	i I
•	e <u>only</u> for ≤ 2m	•	, ,	\$920/\$460 = \$1,440/\$720=			118/218
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(Usable only  7. Enter any previous extension fee pa  8.  9. If <u>Terminal Disclaimer</u> attached, and	y for 30 day/1n aid since above dd Rule 20(d)	no.OA 4 no.OA 5 e <u>original</u> du official fee	mos) mos) e date	\$1,440/\$720= \$1,960/\$980= and <u>subtract</u> <b>Extensi</b>	on Fee Attached + \$110/\$55	+ \$110 + \$0	118/218 128/228 148/248
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NOTE: File this cover sheet in duplicate with PTO receipt (PAT-103A) and attachments